## Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	11/14/13	Address:	250N NEAR EAST COUNTY
Incident #:	13ISPC011315		LINE ROAD
County;	TIPPECANOE		
Type of Laboratory Scizure (check one)		Scizure I.ocation (check all that apply)	
☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☑ Dumpsite (only)		Residence Outbuilding Vehicle	☐ Hotel/Motel ☑ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply)  One Pot or Birch Reaction(s): WOOD LINE			
Red Phosphorous/Iodine Reaction(s):			
Hydrochloric Acid Gas Generator(s):			
☐ Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Cortosive Acid:			
Corrosive Base:			
Other (item and location):			
Vehicle Information:			
Owner: VIN: Year:		Make: Model;	
Yes	age 18 discovered (check appropriate) _ (number present) of present but evidence they reside	unclean Estimated lengoccurring:	ons of home:  clean disarray gth of time manufacturing had been cormation:
This report has been faxed* or emailed to the following agencies that serve the location:			
Fire Department City, Township or County <u>BUCKCREEK FIRE</u> Fax: 765-589-8446 Health Department County: <u>TIPPECANOE CO</u> Fax: 765-423-9154 Department of Child Services Hotline: <u>deshotlinereports@des.in.gov</u> Fax: 317-234-7595 or 317-234-7596			
or further information regarding this mothamphetamine laboratory, contact			

For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>WESLEE ENNIS</u> Phone <u>765-567-2125</u>

<sup>\*</sup>This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing,